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APPLICANTS

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** CONTINUING DATA ***** *None*

** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 5	TOTAL CLAIMS <i>7980</i>	INDEPENDENT CLAIMS 14
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>John de</i> Initials				

ADDRESS

00441

TITLE

SIGNAL MEASUREMENT AND PROCESSING METHOD AND APPARATUS

FILING FEE RECEIVED 2958	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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